

105 CMR 200.000: PHYSICAL EXAMINATION OF SCHOOL CHILDREN

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200.001: Purpose

The purpose of 105 CMR 200.000 is to discover disabilities of school children as soon as possible so as to enable all children to obtain the fullest benefit of their educational opportunities and to insure that diseases dangerous to the public health and other contagious or communicable diseases are recognized whenever they occur.

200.002: Authority

105 CMR 200.000 is adopted under the authority of M.G.L. c. 111, § 3 and c. 71, § 57.

200.003: Citation

105 CMR 200.000 shall be known, and may be cited as, 105 CMR 200.000: *Physical Examination of School Children*.

200.100: Physical Examinations Required By Personal or School Physician

(A) The school health program should encourage the performance of the health appraisal by the family's own physician whenever possible. The results of the family physician's examination shall be recorded on health record forms supplied by the State Department of Public Health through the schools or on such health record forms as are supplied by the schools, after approval by the Department of Public Health. A copy of this record containing the results of the examination and the physician's recommendations shall be returned to the school. The family physician performing the health appraisal of a school child shall be furnished with a copy of the record of screening tests performed in the school.

(B) The school committee or the board of health shall provide the services of a school physician to carry out health appraisals on such children as do not have this service performed by the family physician. He shall carry on other responsibilities of the school health program including

- (1) interpretation of the child's health situation to the school personnel,
- (2) assistance to the teacher and nurse in meeting the health needs of the child insofar as this is possible in the school environment, and
- (3) interpretation of the school health program to the family physician and parents.

200.100: continued

(C) The services of the school physician shall be coordinated in the total school health program. He shall be responsible for the control of communicable disease and give assistance in the formulation of the health education program.

200.200: Student Physical Examinations When Required

(A) Entry Into School. The school committee or board of health shall cause every child in the public schools to be separately and -carefully examined by a physician duly registered in Massachusetts within six months before entrance to school or during the first year after entrance and at intervals of either three or four years thereafter. A child transferred from another school system shall be examined as an entering child unless school health records are transferred with the child showing that he has had an adequate health appraisal in the school year of transfer.

(B) Other Circumstances. The school committee or the board of health shall cause children in the public schools to be separately and carefully examined by a duly registered physician under the following circumstances:

- (1) Children referred because of frequent absences due to unexplained illness.
- (2) Children referred because of known physical defects that require repeated appraisal.
- (3) Children referred from teacher-nurse conference because the child is not making expected progress in school or because of signs of illness noted by the teacher or nurse.
- (4) Children under 16 and over 14 years of age requesting employment certificates.
- (5) Children planning to participate in competitive athletics annually, previous to such participation.

200.300: Student-Physician Conferences

The school committee or the board of health shall regularly make provision that each child may meet with the school physician in conference, with or without the presence of a third person, at the discretion of the physician.

200.400: Testing of Vision and Hearing

(A) The school committee or board of health shall cause the vision and hearing of each child in the public schools to be tested annually.

(B) The hearing of each child shall be tested by means of some form of discrete frequency hearing test such as the Massachusetts Hearing Test.

(C) The vision of each child shall be tested by means of the Massachusetts Vision Test or other similar method approved by the Massachusetts Department of Public Health.

(D) Tests of sight and hearing shall be performed by teachers, physicians, optometrists, nurses or others who are approved by the Massachusetts Department of Public Health for this purpose and in accordance with instructions set up by the Department. (Such personnel may request necessary training from the Massachusetts Department of Public Health. The Department's instructions regarding vision and hearing testing may be procured from the Division of Family Health Services, 39 Boylston Street, Boston.)

200.500: Annual Assessment of Physical Growth and Development

The school committee or board of health shall cause each child's weight and height to be measured annually.

200.600: Procedures for Health Appraisals

(A) The health appraisal shall be done with such care and detail as to command medical respect and be a desirable educational experience for the child. Rectal and vaginal examinations shall not be done by the school physician.

200.600: continued

(B) All appraisals shall be done in the presence of a third person and in a reasonable degree of privacy. The child shall be undressed sufficiently to permit an adequate appraisal.

(C) Sufficient time shall be allotted for an adequate appraisal of each child.

(D) The appraisal shall include time for a conference with the parent or child concerning the child's growth and development and the findings of the health appraisal. The school authorities shall invite the parent or parents of the entering child and of the child in the fourth grade to be present during the appraisal by the physician.

(E) The appraisal should include a careful examination of the child's feet. This examination shall be carried out as part of the overall appraisal of the child's health and shall be made at the time of the physical examination by the school or family physician. When the examination of the feet is made by the chiropodist (podiatrist), it shall be done at the time the school physician is making his examination; and abnormal conditions found by the chiropodist (podiatrist) shall be drawn to the attention of the physician and recorded on the school health record form. These abnormalities shall be followed up through the same avenues as other health defects found among school children in the particular community. The examination of the feet of school children in the schools shall be done without the use of x-rays.

200.700: Follow-up After Appraisals

Disabilities and defects found on health appraisal of an individual child shall be brought to the attention of the family. The school or health department shall encourage the family to take the child with physical defects to the family physician or other source of care.

200.800: Examination of Students for Communicable or Contagious Disease

The school physician shall examine at any time, including the required intervals, and previous to participation in competitive athletics, each child to determine the presence or absence of disease dangerous to the public health and other communicable or contagious diseases, in consonance with the last line of M.G.L. c. 71, § 57 as most recently amended by St. 1951, c. 502.

200.900: Local Authority to Establish Higher Requirements

105 CMR 200.100 through 200.800 are minimum regulations for the examination of school children in Massachusetts. The school committee or board of health may provide for more frequent and more specialized examinations or both if it wishes to do so.

200.910: Waivers of Requirements

Except as provided by law, the Massachusetts Department of Public Health shall have the discretionary power to waive any of 105 CMR 200.100 through 200.800 upon written request.

(A) The request for a waiver must be accompanied by an alternative plan to the regulation that would indicate an improvement of the health of the school child.

(B) Individual alternative school health programs submitted for approval must not reflect a cut back in the school health budget.

(C) Waivers may be granted for periods up to one year and may be renewed upon demonstration of improvement in school health programs.

(D) The Department of Public Health School Health Unit staff will provide consultation and will review the school health programs being granted waivers.

200.920: Health Record Forms

Results of these health appraisals shall be recorded in detail on health record forms provided by or approved by the Massachusetts Department of Public Health.

REGULATORY AUTHORITY

105 CMR 200.000: M.G.L. c. 111, § 3; c. 71, § 57.